



Affiliate Membership

Membership Application	<input type="checkbox"/>
Membership Renewal	<input type="checkbox"/>

Yes, our organization would like to receive the benefits of an affiliate member of the Fire Marshal's Public Fire Safety Council. We understand the annual fee is \$100.00.

Membership #: _____

Organization Name: _____

Name of Representative: _____

Title: _____

Billing Address: _____

Phone: _____ Fax: _____

E-Mail: _____

Signature: _____

Method of Payment :

Payment by Cheque:

TOTAL AMOUNT ENCLOSED OR AUTHORIZED TO CHARGE \$ _____
CHECK HERE IF RECEIPT REQUIRED <input type="checkbox"/>

Please make cheques payable to: Fire Marshal's Public Fire Safety Council , 5775 Yonge Street, 7th Floor, Toronto, ON M2M 4J1

Payment by Credit Card:

VISA # _____ Expiry Date: _____

MasterCard # _____ Expiry Date: _____

Please send invoice: P.O. # _____

Fax to: (416) 325-3162 Attention: Anne Miller or mail to:

**Fire Marshal's Public Fire Safety Council
5775 Yonge Street, 7th Floor, Toronto, ON M5N 2J1
Telephone: (416) 325-3152
Email: anne.miller@jus.gov.on.ca**